



DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☑ Declaration Submitted with Initial Filing, OR
 ☑ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

First Named Inventor Edward G. Callway
COMPLETE IF KNOWN
Application Number:
Filing Date:
Group Art Unit;
Examiner Name:

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled. WIRELESS NISPLAY A PAPAR ATUS AND METHOD.

	ow) of the subject matter which is claimed and for which	in a patent is sought of
the invention entitled: WIRELESS DI	SPLAY APPARATUS AND METHOD	
the specification of which:		
is attached hereto.		
was filed on (MM/DD/YYYY)	as United States Application Number or Po	CT International
Application Number	and was amended on (MM/DD/YYYY)	
		(n applicable).
Therefore state short the control of		
	understand the contents of the above identified specific	cation, including the
claims, as amended by any amendmen	t specifically referred to above.	

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(b) of any PCT international application which designated at least one country other than the United States of America, listed below and have been destroised, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application for absent or inventor's certificate, or of any PCT international application for absent or inventor's certificate, or of any PCT international application for absent or inventor's certificate, or of any PCT international application for absent or inventor's certificate, or of any PCT international application for a superior of the patent of the patent of the patent or inventor's certificate, or of any PCT international application for a patent or inventor's certificate, or of any PCT international application or any PCT international application of the patent or inventor's certificate, or of any PCT international application or any PCT inter

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

having a filing date before that of the application on which priority is claimed.

I hereby claim the henefit under 35 II S.C. 119(e) of any United States provisional applic

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Thereby clean all benefit and a 5.5.6. 117(b) of any clinica states provisional application(s) listed below.						
Application Number(s)	Filing Data (MM/DD/YYYY)					

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofter as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, lacknowledge thy to disclose information which is material to patentiality as defined in 37 CPR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

COPY OF	PAPERS
ORIGINAL	LY FILED

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transaction all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Angelo J. Bufalino	29,622	Christopher J. Reckamp	34,414
Joseph P. Krause	32,578	Michael Turgeon	39,404
Christopher Moreno	38,566		

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.\

Direct all correspondence to:

Vedder, Price, Kaufman & Kammholz 222 N. LaSalle Street, Suite 2600 Chicago, Illinois 60601 Telephone: 312-609-7500 Facsimile: 312-609-5005

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilfful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilfful false statements may icopardize the validity of the application or any patent issued thereon.

A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname CALLWAY EDWARD G Inventor's 25-6 Nau 122007 Signature City: Toronto State; Ontario Country: Canada Citizenship: CANADA Residence Post Office Address | 392 MERTON STREET State: ONTARIO ZIP: M4S1B3 Country; CANADA City: TORONTO

Name of Addition	nal Joint l	nventor	1	A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
DAVID			GLEN				
Inventor's	0	1.19.		Date		9 41	
Signature			leen		Nem		
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Name of Addition	nal Joint	Inventor:	☐ A petition has	A petition has been filed for this unsigned inventor			
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Inventor's			Date				
Signature				1			
Residence	City:	State:	Country:	Citizenship:			
Post Office Add	Post Office Address						
City:		State:	ZIP:	Country:			

Name of Additi	ional Joint	Inventor:	A petition has	 A petition has been filed for this unsigned inventor 		
Given N	lame (first a	nd middle [if any])		Family Name or Surname		
Inventor's	1		Dute			
Signature						
Residence	City:	State:	Country:	Citizonship:		
Post Office Address						
City:		State;	ZJP;	Country:		

Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A standed hereto.

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